Community Renewal Team (CRT)

Hartford, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

Provider Activity





Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	257	41.4%
	Residential Services	81	13.0%
Mental Health	1		
	Outpatient	98	15.8%
	Case Management	71	11.4%
	Residential Services	4	0.6%
Forensic SA			
	Case Management	110	17.7%

Consumer Satisfaction Survey

(Based on 153 FY13 Surveys)



Client Demographics

Age	#	%	State Avg	Gender	#	%	Stat	e Avg
18-25	47	8%	16%	Male	289	52%		60%
26-34	115	21%	23%	Female	265	48%		40%
35-44	124	22%	20%					
45-54	129	23%	24%					
55-64	65	12%	14%	Race	#	%	Stat	e Avg
65+	75	14%	4%	Other 📙	180	32%	_	14%
				Black/African American 📙	139	25%		17%
Ethnicity	#	%	State Avg	White/Caucasian	93	17%	•	65%
Non-Hispanic	318	57%	▼ 75%	Unknown	86	15%	_	3%
Hisp-Puerto Rican	121	22%	12%	Asian <mark> </mark>	55	10%		1%
Unknown	81	15%	6%	Am. Indian/Native Alaskan	3	1%		1%
Hispanic-Other	34	6%	6%	Multiple Races				1%
	1	0%	0%	Hawaiian/Other Pacific Islander				0%
Hispanic-Cuban								
Hispanic-Mexican	1	0%	0%					
<u> </u>	Unique C	lients	State Avg	▲ > 10% Over State Avg	> 10% (Jnder S	tate A	/g

Asian Family Service OP 627210

Community Renewal Team (CRT)

Mental Health - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

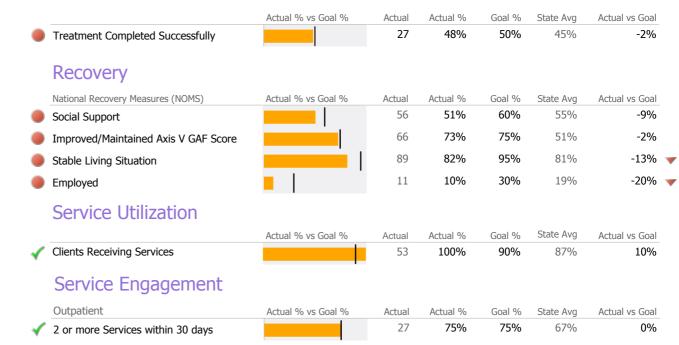
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	98	105	-7%	
Admits	38	32	19%	•
Discharges	56	38	47%	•
Service Hours	914	1,433	-36%	•

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	87%	88%
On-Time Periodic	Actual	State Avg
6 Month Updates	89%	54%
Cooccurring	Actual	State Avg
✓ MH Screen Complete	91%	71%
SA Screen Complete	80%	67%
Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	98%	98%
√ Valid Axis V GAF Score	98%	91%

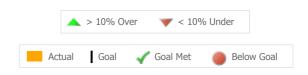
Discharge Outcomes



Data Submitted to DMHAS by Month

1 or more Records Submitted to DMHAS

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													92%
Services													100%



^{*} State Avg based on 91 Active Standard Outpatient Programs

CORP-Prison Off Re-entry703555

Community Renewal Team (CRT)

Mental Health - Residential Services - Residential Support

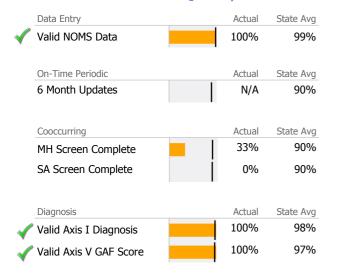
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

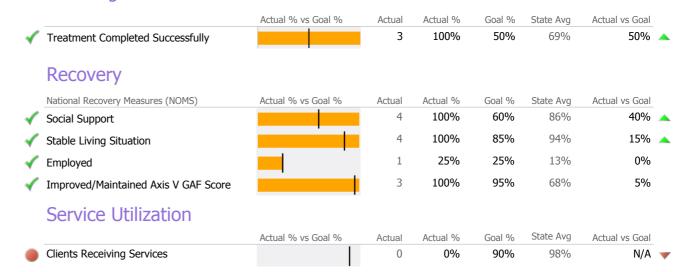
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	5	-20%	\blacksquare
Admits	3	4	-25%	•
Discharges	3	4	-25%	•
Sarvica Hours	_			

Data Submission Quality



Discharge Outcomes



Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													25%
Discharges													25%
Services													0%

1 or more Records Submitted to DMHAS



^{*} State Avg based on 52 Active Residential Support Programs

Gatekeeper Program

Community Renewal Team (CRT)

Mental Health - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

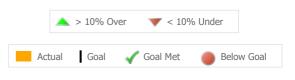
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	59	43	37%	•
Admits	52	46	13%	•
Discharges	58	41	41%	•
Service Hours	53	25	110%	•

Service Engagement



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													83%
Discharges													58%
Services													8%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS								



^{*} State Avg based on 41 Active Outreach & Engagement Programs

Next StepsHsgSuppPilots 703551

Community Renewal Team (CRT)

Mental Health - Case Management - Supportive Housing - Scattered Site

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	12	13	-8%
Admits	11	-	
Discharges	10	11	-9%
Service Hours	104	32	225% 🔺

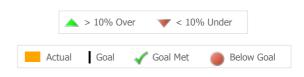
Recovery

√	Clients Receiving Services		3	100%	90%	93%	10%	
		Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
	Service Utilization							
	Stable Living Situation		4	31%	85%	89%	-54%	1
	National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	57%	97%
On-Time Periodic	Actual	State Avg
6 Month Updates	0%	83%

	Jı	ul A	ug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions														67%
Discharges														67%
Services														83%
	1 or	more F	Records	s Subn	nitted to	DMHAS	6							



^{*} State Avg based on 67 Active Supportive Housing – Scattered Site Programs

Post-Release Transitional Forensic Case Management

Community Renewal Team (CRT)

Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

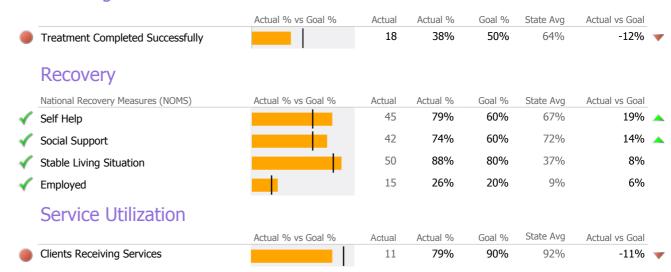
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	55	37	49%	•
Admits	48	30	60%	•
Discharges	48	28	71%	•
Service Hours	337	275	22%	•

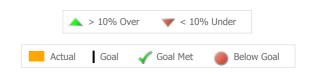
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	89%	93%
On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	13%

Discharge Outcomes



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													75%
	1 or r	nore Reco	rds Suhi	mitted to	DMHAS								



^{*} State Avg based on 8 Active Standard Case Management Programs

Pre-Release Transitional Forensic Case Management

Community Renewal Team (CRT)

Forensic SA - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

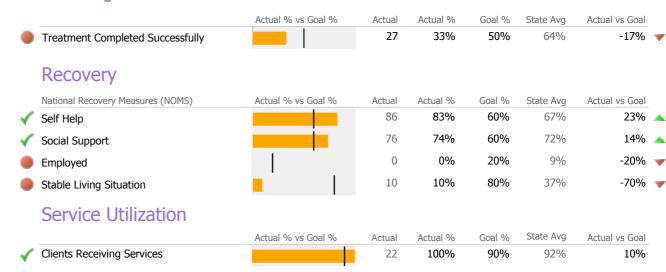
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	99	116	-15%	\blacktriangledown
Admits	78	86	-9%	
Discharges	82	92	-11%	•
Service Hours	214	357	-40%	•

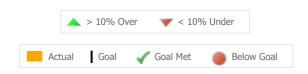
Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	90%	93%
On-Time Periodic	Actual	State Avg
6 Month Updates	100%	13%

Discharge Outcomes



	J	lul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions	5													92%
Discharges	i													100%
Services														83%
	1.0	r more	Pacor	rde Suhm	itted to	DMHVC								



^{*} State Avg based on 8 Active Standard Case Management Programs

SA Outpatient 703725

Community Renewal Team (CRT)

Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	257	325	-21%	\blacksquare
Admits	157	187	-16%	•
Discharges	128	231	-45%	•
Service Hours	3,411	3,997	-15%	•

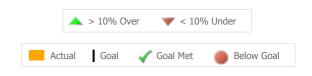
Data Submission Quality

Data Entry		Actual	State Avg
Valid NOMS Data		59%	95%
Valid TEDS Data		85%	95%
On-Time Periodic		Actual	State Avg
√ 6 Month Updates		36%	33%
Cooccurring		Actual	State Avg
✓ MH Screen Complete		99%	95%
SA Screen Complete		99%	95%
	•		
Diagnosis		Actual	State Avg
√ Valid Axis I Diagnosis		100%	99%
✓ Valid Axis V GAF Score		100%	92%
4			

Discharge Outcomes



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													100%
Discharges													100%
Services													100%
	1 or m	ore Reco	rds Subr	nitted to	DMHAS								



^{*} State Avg based on 117 Active Standard Outpatient Programs

Women's and Childrens Residential Program

Community Renewal Team (CRT)

Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

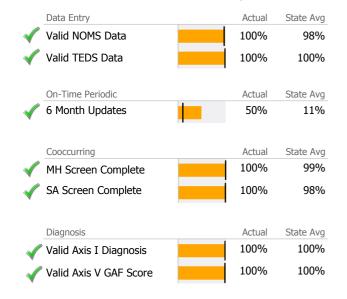
Connecticut Dept of Mental Health and Addiction Services Program Quality Dashboard

Reporting Period: July 2013 - June 2014 (Data as of Aug 14, 2014)

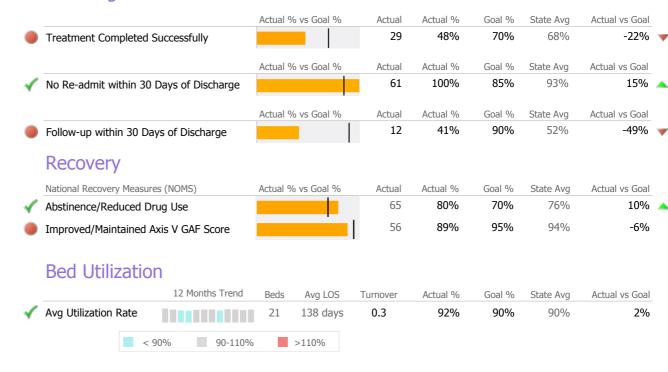
Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	81	49	65%	•
Admits	62	36	72%	•
Discharges	61	30	103%	•
Bed Days	7,056	5,463	29%	•

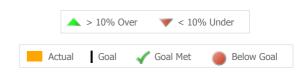
Data Submission Quality



Discharge Outcomes



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	% Months Submitted
Admissions													92%
Discharges													92%
	1 or mo	ore Reco	rds Subn	nitted to	DMHAS								



^{*} State Avg based on 40 Active Intermediate/Long Term Res.Tx 3.5 Programs